



Image

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1614

VPI/SW/002 CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

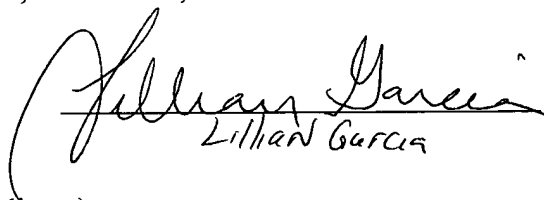
Examiner : Cybille Delacroix Muirheid
Group : 1614
Applicants : Paul R. Sleath et al.
Application No. : 09/670,106 Confirmation No.: 5809
Filed : September 26, 2000
For : INTERLEUKIN 1 β PROTEASE AND INTERLEUKIN 1 β
PROTEASE INHIBITORS

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

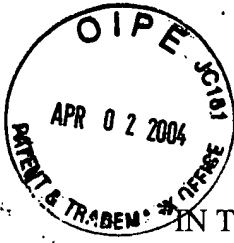
“EXPRESS MAIL” mailing label number EV270263070US

Date of Deposit: April 2, 2004

I hereby certify that the following papers/fees* are being deposited with the United States Postal Service “EXPRESS MAIL POST OFFICE TO ADDRESSEE” service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Lillian Garcia

*Enclosures:
Transmittal Letter (in duplicate);
Response to Office Action; and
Postcard.



VPI/SW/002 CIP2 FWC DIV2 CON

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New York, New York
April 2, 2004

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith for filing are the following:

☒ a Response to Office Action; Action; and ☒ postcard; to be filed in
the above-identified application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

Express Mail:
EV270263070US

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	* =	X \$ 18 =	\$
INDEPENDENT CLAIMS	-	** =	X \$ 86 =	\$
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM			+ \$290 =	\$

* If less than 20, insert 20.

TOTAL

\$

** If less than 3, insert 3.

☐ A check in the amount of \$___ in payment of the filing fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge \$___ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE


☐ The following extension fee is applicable to the Response filed herewith; ☐ \$110.00 extension fee for response within first month; ☐ \$420.00 extension fee for response within second month; ☐ \$950.00 extension fee for response within third month; ☒ \$1,480.00 extension fee for response; ☐ \$2,010.00 within fifth month.

☒ A check in the amount of ☐ \$110.00; ☐ \$420.00; ☐ \$950.00; ☐ \$1,480.00; ☐ \$2,010.00; in payment of the extension fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

[] Please charge the [] \$110.00; [] \$420.00; [] \$950.00; [] \$1,480.00; [] \$2,010.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



James F. Haley, Jr. (Reg. No. 27,794)

Min Wang (Reg. No. 51,303)

Attorneys for Applicants

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PROTEASE INHIBITORS

New York, New York
April 02, 2004

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

This responds to the February 2, 2004 Office Action in the above-identified application.

Kindly amend the application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 6 of this paper.